

**CONISBROUGH  
URBAN DISTRICT COUNCIL**



**THE HEALTH  
of  
CONISBROUGH  
1966**





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# **CONISBROUGH URBAN DISTRICT COUNCIL**

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## **Members as at 31st December, 1966**

**Chairman of the Council :**  
Councillor A. Haywood, J.P. (C.C.)

**Vice-Chairman of the Council :**  
Councillor R. H. Shepherd

**Chairman of the Public Health Committee :**  
Councillor P. O'Neill

### **Councillors :**

Mrs. D. Limer, J.P.	J. Prendergast, C.C.
Mrs. F. Warren	B. Short
G. Cheshire	J. Stewart
T. Hill	J. Taylor
A. Mason	A. E. Tyas
F. Oakley	W. West

**Medical Officer of Health :**  
D. J. CUSITER, M.B., Ch.B., D.P.H., D.T.M. & H.

**Cheif Public Health Inspector :**  
E. T. SWIFT, M.P.H.I.A.

## P R E F A C E

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Public Health Department,  
Council Offices,  
The Priory,  
High Street,  
Conisbrough.

To the Chairman and Members of  
Conisbrough Urban District Council

Mr. Chairman, Ladies and Gentlemen :

I include in this annual report of the health of your district details of the County Council health and school health services.

The population showed a natural increase of 110 and an overall decrease of 10 according to the Registrar General's estimate of the resident population for mid-1966.

There were no maternal deaths in the district. 9 deaths were recorded in children under one year of age from a total of 309 live births. 6 of these deaths were of premature babies. Of the infant deaths 2 were born at home and 7 in hospital, but all the deaths occurred in hospital and none attained the age of one month. The infant mortality rate (deaths under one year of age per thousand live births) was 29·1 slightly less than the previous year but still in excess of the rates for other districts in the division. In comparison a rate of 20·1 was recorded for the West Riding as a whole, 19·0 for England and Wales and 22·1 for the whole of the health division no. 26.

The corrected birth rate was 17·2 per thousand estimated population (West Riding 18·2) based on a decreasing population and this rate is lower than for the previous year when it was 18·5.

The corrected death rate was 13·3 which is slightly in excess of that for the West Riding as a whole (12·9).

The total deaths were 199 of which 71 were due to diseases of the heart and blood vessels, 26 to cancer in various sites, 29 to respiratory disease and 23 to vascular lesions of the nervous system. These correspond to rates of 3.99 (West Riding 4.48); 1.57 (West Riding 2.00); 1.63 (West Riding 1.72) and 12.9 (West Riding 1.87). 2 deaths occurred from tuberculosis but there were no deaths recorded from any other infectious disease.

The number of illegitimate births registered was 14, 7 fewer than in 1965. One illegitimate infant death was recorded.

The care of the elderly is rapidly becoming one of the major problems of the health department. The district councils are providing more and more ground floor accommodation with warden supervision, but surveys carried out by this department for each district in connection with the allocation of tenancies in new schemes show that the need for such accommodation is probably double that already provided.

Modern residential homes, each with accommodation for 35 old people, have been provided in recent years by the County Welfare Committee in Rawmarsh, Wath-upon-Deane, Thurnscoe and Conisbrough. A similar building in Swinton will be opened in 1967. Nevertheless, there is still a long waiting list for admissions.

344 aged persons in the division benefit from the meals on wheels service and 784 meals are provided weekly at a charge of 1s. 0d. per head to the recipient. 2,744 old people received chiropody treatment during 1966 when 12,665 treatments were carried out either in clinics or at the homes of the patient. The home help service is provided in the homes of 1,265 pensioners and home helps were employed for a total of 172,337 hours at these homes in the year. In emergencies, for terminal cases of illness, night care is also available.

The biggest problem, however, is the shortage of geriatric hospital beds. Day after day, relatives write or visit this office enlisting the help of the Medical Officer of Health regarding admission of their aged parents to hospital. Many of these relatives have struggled for months to provide the necessary care and attention themselves, others are reluctant to do so or for pressing family reasons are unable to do so. It appears

to the public that, because hospital admissions for aged sick persons take so long in this area, the general practitioner in charge of the case is not doing all he can for the patient and they assume that the Medical Officer of Health has overall authority over the situation, which he has not.

A Planning Group for the care of the elderly in hospitals and residential homes, of which I am a member, was formed by the Rotherham and Mexborough Hospital Management Committee in 1966 to discuss these problems. It is estimated that there is a 48% shortage of geriatric beds in the area of the Hospital Management Committee and until this deficiency is rectified the work of the general practitioner will continue to increase and more resources will be needed by the local authority to fill the breach.

The shortage of general practitioners in the area poses yet a further problem. The County Council in an effort to provide better facilities for the family doctor, offers accommodation in child welfare centres for surgery purposes at a modest rental, and in the division family doctors are using Mexborough clinic (three practices), Conisbrough clinic (one practice), Monkwood clinic (one practice) and Kilnhurst clinic (one practice). Thurnscoe clinic is at present being extended to provide accommodation for a group practice of four doctors, and a new clinic being planned for Swinton will be able to accommodate four family doctors. General Practitioners also conduct their own antenatal clinics with assistance from the District Midwives at Conisbrough and Mexborough Clinics. All Health Visitors in the division are attached to general practitioners, as are the Home Nurses.

The morbidity statistics for the area as supplied by the Ministry of Social Security reveal a high incidence of sickness in the weeks immediately following bank holidays, works holidays and during the September race week in Doncaster. Would it be naive to conclude that holidays have a harmful effect on the health of some? This problem is national and not confined to this area. The Executive Council are aware of the problem of the shortage of family doctors in this area.



I would again like to record my thanks to Mr. E. T. Swift the Public Health Inspector for his work and co-operation during the year, and also to the members of the Public Health Committee for their continued support. My thanks are also due to the staff of the Divisional Health Office for their help in the preparation of this report.

I remain,

Your obedient servant,

D. J. CUSITER,

Medical Officer of Health

Divisional Public Health Office,  
Dunford House,  
Wath-upon-Dearne, Rotherham.

Tel. No. Wath-upon-Dearne 2251/2

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## SECTION "A"

### NATURAL AND SOCIAL CONDITIONS OF THE AREA

#### (a) General Statistics

Area (in acres)	...	...	...	...	...	1,593
Registrar-General's estimate of Resident Population						
Mid-1966	...	...	...	...	...	17,780
Number of inhabited houses at 31st December, 1966						5,355
Population density (persons per house)	...	...				3.3
House density (houses per acre)	...	...	...			3.4
Rateable value	...	...	...	...	...	£327,450
Net product of 1d. rate	...	...	...	...	...	£1,206

#### (b) Physical and Social Conditions

The Registrar General's estimate of resident population for mid-1966 shows an overall decrease of 10. The natural increase of population i.e. excess of births over deaths for the whole year was 110.

The number of dwelling houses increased by 41, all of which were completed by private enterprise.

The main employment in the area is provided by coal mining (61% men) electric domestic equipment, coal by-products, glass containers, stoves and grates and soft drink manufacture. Over 400 women travel daily by organised transport to employment in the West Riding textile industry, food canning at Sheffield, engineering at York and confectionery at Rotherham.

### VITAL STATISTICS

#### Live Births—

					Males	Females	Total
Total	...	...	...	...	171	138	309
Legitimate	...	...	...		168	131	299
Illegitimate	...	...	...		3	7	10
Live Birth Rate (uncorrected)							
per 1,000 population	...	...	...	...	...	...	17.4
Live Birth Rate (corrected)							
per 1,000 population	...	...	...	...	...	...	17.2
Illegitimate live births percentage of total live births	...	...	...	...	...	...	3.2

# Still-births—

	Males	Females	Total
Total ... ..	2	4	6
Rate per 1,000 live and still births	...	...	19.0
	Males	Females	Total
Total Live and Still-births ...	173	142	315

# Deaths of Infants under 1 year of age—

	Males	Females	Total
Total ... ..	5	4	9
Legitimate ... ..	5	3	8
Illegitimate ... ..	—	1	1
Infant Mortality Rate per 1,000 live births	...	...	29.1
Legitimate Infants per 1,000 legitimate live births	...	...	26.8
Illegitimate Infants per 1,000 illegitimate live births	...	...	100.0
Neo-natal mortality rate (deaths under 4 weeks per 1,000 total live births)	...	...	29.1
Early neo-natal mortality rate (deaths under 1 week per 1,000 total live births)	...	...	16.2
Perinatal mortality rate (still-births and deaths under 1 week combined per 1,000 total live and still-births)	...	...	34.9

# Maternal mortality, including abortion—

Number of deaths ... ..	Nil
Rate per 1,000 total live and still-births ...	—

<b>Total Deaths</b> ... ..	199
Death Rate (uncorrected) ... ..	11.2
Death Rate (corrected) ... ..	13.3
Natural increase of population ... ..	110

# Causes of Death at different periods of Life during 1966 in the Urban District of Conisbrough

CAUSE OF DEATH	Sex	Total all Ages.	Under 4 Weeks.	4 Weeks and under 1 year	AGE IN YEARS							
					1—5	5—15	15—25	25—35	35—45	45—55	55—65	65—75 and over
1. Tuberculosis, Respiratory .....	M	2	—	—	—	—	—	1	—	—	1	—
	F	—	—	—	—	—	—	—	—	—	—	—
10. Malignant Neoplasm, Stomach.	M	1	—	—	—	—	—	—	—	—	1	—
	F	2	—	—	—	—	—	—	—	—	—	2
11. Malignant Neoplasm, Lung, Bronchus. ....	M	4	—	—	—	—	—	—	1	2	1	—
	F	2	—	—	—	—	—	—	—	—	1	1
12. Malignant Neoplasm, Breast .....	M	—	—	—	—	—	—	—	—	—	—	—
	F	2	—	—	—	—	—	—	1	1	—	—
13. Malignant Neoplasm, Uterus. ....	F	1	—	—	—	—	—	—	—	1	—	—
14. Other Malignant and Lymphatic Neoplasms. ....	M	8	—	—	—	1	—	—	—	1	—	—
	F	6	—	—	—	—	—	—	1	—	5	1
15. Leukaemia, Aleukaemia .....	M	1	—	—	—	1	—	—	—	—	4	—
	F	1	—	—	—	—	—	—	—	—	1	—
16. Diabetes . ....	M	—	—	—	—	—	—	—	—	—	—	—
	F	4	—	—	—	—	—	—	—	—	1	3
17. Vascular Lesions of Nervous System. ....	M	10	—	—	—	—	—	2	1	2	2	3
	F	13	—	—	—	—	1	1	—	—	3	8
18. Coronary Disease, Angina. ....	M	16	—	—	—	—	—	1	3	6	4	2
	F	11	—	—	—	—	—	—	1	2	3	5
19. Hypertension with heart disease. ....	M	1	—	—	—	—	—	—	—	—	1	—
	F	2	—	—	—	—	—	—	—	—	1	1
20. Other heart disease. ....	M	3	—	—	—	—	—	—	—	—	—	2
	F	27	—	—	—	—	—	—	—	1	4	23
21. Other Circulatory Disease .....	M	4	—	—	—	—	—	1	—	—	3	—
	F	7	—	—	—	—	—	—	—	—	1	6

# Causes of Death at different periods of Life during 1966 in the Urban District of Conisbrough

CAUSE OF DEATH	Sex	Total all Ages.	Under 4 Weeks.	4 Weeks and under 1 year	AGE IN YEARS									
					1—	5—	15—	25—	35—	45—	55—	65—	75 and over	
23. Pneumonia.	M	5	—	—	—	—	—	—	—	—	2	1	2	
	F	7	1	—	—	—	—	—	—	—	—	2	4	
24. Bronchitis.	M	10	—	—	—	—	—	—	—	—	3	5	2	
	F	4	—	—	—	—	—	—	—	—	—	1	2	
25. Other diseases of respiratory system.	M	2	—	—	—	—	—	—	—	—	—	2	—	
	F	1	—	—	—	—	—	—	—	1	—	—	—	
26. Ulcer of stomach and duodenum.	M	1	—	—	—	—	—	—	—	—	—	—	—	
	F	1	—	—	—	—	—	—	—	—	—	—	—	
28. Nephritis and Nephrosis.	M	2	—	—	—	—	—	—	—	—	1	1	—	
	F	—	—	—	—	—	—	—	—	—	—	—	1	
29. Hyperplasia of Prostate	M	2	—	—	—	—	—	—	—	—	—	—	—	
31. Congenital malformations.	M	1	—	—	—	—	—	—	—	—	—	—	—	
	F	2	2	—	—	—	—	—	—	—	—	—	—	
32. Other defined and ill-defined diseases.	M	14	5	—	—	2	1	—	1	—	1	2	3	
	F	8	1	—	—	—	—	3	—	—	2	5	1	
33. Motor vehicle accidents.	M	5	—	—	—	—	—	—	—	—	—	—	—	
	F	—	—	—	—	—	—	—	—	—	—	—	—	
34. All other accidents.	M	4	—	—	—	—	2	—	—	—	1	1	—	
	F	2	—	—	—	—	—	—	—	—	—	—	—	
35. Suicide.	M	1	—	—	—	—	—	1	—	—	—	—	—	
	F	—	—	—	—	—	—	—	—	—	—	—	—	
Total all causes.	M	97	5	—	2	8	2	—	6	7	21	30	16	
	F	102	4	—	2	—	—	—	1	4	4	28	58	

# Deaths of Infants under 1 year of age

No.	Date of death	Cause of death	Age	Birth weight	Died	Dom. or Inst. birth
1.	15.2.66	1a Congenital heart defect (Cor Trilobular)	1 week	6·11	Western Hospital, Doncaster.	Inst.
2.	14.3.66	1a Cerebral haemorrhage b Rupture of tentorium cerebella	1 day	5·2	Western Hospital, Doncaster.	Dom.
3.	2.4.66	1a Atelectasis of lungs b Cord round neck	4 hours	6·7	Montagu Hospital, Mexborough.	Dom.
4.	6.4.66	1a Congenital heart lesion	3 weeks	8·1	Childrens Hospital, Sheffield.	Inst.
5.	8.4.66	1a Prematurity	1 hour	2·0	Montagu Hospital, Mexborough.	Inst.
6.	10.6.66	1a Septic meningitis	2 weeks	4·14	Montagu Hospital, Mexborough.	Inst.
7.	16.9.66	1a Prematurity	21 hours	4·0	Montagu Hospital, Mexborough.	Inst.
8.	9.11.66	1a Bronchopneumonia	3 weeks	4·14	Montagu Hospital, Mexborough.	Inst.
9.	22.12.66	1a Atelectasis b Prematurity	6 hours	3·1	Montagu Hospital, Mexborough.	Inst.

## CONISBROUGH 1966

	Conisbro' Urban District 1966	Div. 26 1966	Aggregate West Riding Urban Districts	West Riding Administra- tive County	England and Wales
Population .....	17,780	110,290	1,238,310	1,748,970	*
Live Births (Crude)	17.4	18.5	17.8	18.0	17.7
Live Births (Corrected)	17.2	18.0	18.2	18.2	
Death Rate—All causes	11.2	11.4	12.9	12.1	11.7
Crude					
Death Rate—All causes	13.3	14.5	13.3	12.9	11.7
Corrected					
Infective and Parasitic Diseases—excluding Tuberculosis, but including Syphilis and other V.D. ....	0.00	0.01	0.03	0.03	*
Tuberculosis:—					
Respiratory .....	0.11	0.05	0.05	0.05	0.04
Other Forms .....	0.00	0.00	0.00	0.00	0.01
All Forms .....	0.11	0.05	0.05	0.05	0.05
Cancer .....	1.57	1.76	2.16	2.00	2.25
Vascular Lesions of the Nervous System .....	1.29	1.32	2.02	1.87	*
Heart and Circulatory Diseases .....	3.99	4.22	4.77	4.48	*
Respiratory Diseases .....	1.63	1.99	1.88	1.72	*
Maternal Mortality	0.00	0.00	0.31	0.25	0.26
Infant Mortality .....	29.1	22.1	20.1	19.8	19.0
Neo Natal Mortality .....	29.1	15.2	13.2	12.6	12.9
Perinatal Mortality .....	34.9	27.5	25.9	25.1	26.3
Still-Births	19.0	16.4	14.9	14.4	15.4

\* Figures not available



## DIVISIONAL VITAL STATISTICS

In the discussion that follows it should be remembered that the rates are calculated on relatively small numbers and that variations from year to year may or may not be statistically valid. No conclusions can, therefore, be drawn from minor annual fluctuations but observation of the overall trend of the differing rates over a period of years is of value.

### Live Births :

In this division in 1966 113 illegitimate births have been recorded from a total of 2,038 live births. 5·5% of all live births in the division were, therefore, illegitimate. In the previous year the percentage was 4·9% when 102 illegitimate births were registered from a total of 2,070 live births. This rising trend in illegitimate births applies to the whole country but is more pronounced in the larger cities and towns.

For some years now the number of births and the birth rate have progressively increased. The birth rate for the division in 1966 was 18·5 per thousand live births which is exactly the same rate as for 1965. The rate for the administrative county was 18·0, and for England and Wales 17·7. The divisional birth rate is, therefore, slightly higher than that for the county and for the country as a whole.

The national increase of population i.e. excess of births over deaths was 813. Nevertheless the Registrar General's estimate of population for mid 1966 for the division as a whole showed a decrease of 110. These figures would indicate that approximately 900 people have migrated from the area during the year, and as there has been an increase in the population of adjoining rural districts it would appear that many families are moving to modern houses recently constructed in the more amenable country districts where they also have the benefit of lower rates.

### Deaths :

The death rate for the division from all causes was 11·5 per 1,000 of the population compared with a West Riding rate of 12·1 and 11·7 for England and Wales. Whilst this rate approximates closely to that for the rest of the country and the remainder of the West Riding, the rates for individual causes of death reveal an interesting feature in this division. Whereas the most common causes of death for England and Wales in descending order are as follows, heart and circulatory diseases, cancer, vascular lesions of the nervous system and



respiratory diseases, in this division respiratory diseases now occupy second position instead of fourth. Whilst perhaps this could be attributed to environmental conditions at work, i.e. in the coal mining industry, there is no doubt that atmospheric pollution is an underlying cause.

### **Infant Mortality :**

The infant mortality rate represents the number of children who die under the age of one year calculated per thousand live births. The rate for this division was 22.1 in 1966 which is less satisfactory than last year when the rate was 18.1. The rate for the West Riding County fell in 1966 to 19.8 compared with 20.7 in 1965. The rate for England and Wales in 1966 was 19.0.

This rate is an index of the apparent gain in health of any community and has shown a decline of 130 per thousand since the end of the nineteenth century. The causes of death of the infants who die in this division are representative of the general pattern of infant deaths in England and Wales i.e. respiratory diseases being the most common cause followed by congenital malformations, gastro-enteritis and infectious diseases.

### **Peri-natal Mortality :**

The peri-natal mortality rate includes stillbirths and deaths under one week per thousand live and stillbirths. It provides a more satisfactory guide to the standard of maternal care than the infant mortality rate by itself, as deaths of infants under one week and stillbirths represent the hard-core of infant mortality, and the problem now is to determine the cause of death and decide the best measures to be taken during the ante-natal period to avoid these deaths.

The peri-natal mortality rate in 1966 was 27.5 compared with a rate for the West Riding of 25.1.

Whilst the local rate is slightly higher than for 1965 the general all round improvement has been maintained. The stillbirth rate per thousand live and stillbirths was 16.4 compared with 17.6 in 1965 and 19.6 in 1964. However, the rate still remains slightly higher than that for the West Riding as a whole which was 14.4 in 1966. The commonest causes of death are prematurity, post-natal asphyxia, congenital malformations and birth injuries. Prematurity remains the dominant factor.

## **Tuberculosis :**

The death rate for tuberculosis remains at a satisfactory low level. With a total of 6 deaths in 1966 the rate was 0.05 and the West Riding rate was the same. With the recent influx of susceptible populations to this country efforts at eradication of this disease must continue and such measures as contact tracing, B.C.G. vaccination, the use of diagnostic radiological services and continuing improvements in nutrition must be diligently applied.

## **Infective and Parasitic Diseases :**

The rate for this disease including all infectious conditions except tuberculosis but including venereal disease was 0.1 per thousand and only one death was recorded in the division in 1966. The position is, therefore, a satisfactory one.

## **Cancer :**

In 1966 the death rate for cancer of all sites was 1.76 per thousand of the estimated population (West Riding rate 2.0). A total of 189 deaths was attributed to cancer, 10 fewer than in 1965. Deaths from cancer of the lung total 44 compared with 55 in the previous year. 23.3% of all cancer deaths were due to cancer of the lung and 34 of the 44 deaths were in males.

Cancer of the lung is now the most common type of malignant disease in the country and presents a major health hazard. In England and Wales as a whole one third of the total cancer deaths are from these causes, and the overwhelming majority of physicians have no doubt that this increase is due to cigarette smoking.

## **Vascular Diseases of the Nervous System :**

The death rate from these causes was 1.32 per thousand of the population (West Riding rate 1.87). This was slightly lower than for 1965, although the upward trend in the West Riding as a whole continues. Under this heading deaths are included from such factors as strokes due to cerebral haemorrhage, thrombosis or embolism, and mortality increases progressively with age.

## **Heart and Circulatory Diseases :**

This group represents the most common cause of death in the country. The rate for this division was 4.22 per thousand compared with a rate of 4.48 for the West Riding as a whole. The rate for this area shows only a slight fluctuation from that recorded for 1965.

Included in this group are deaths from coronary disease and angina, and the mortality is appreciably high at the age of 55 years and upwards.

### **Diseases of the Respiratory System :**

As previously reported deaths from respiratory diseases are disproportionately high in this division (17.7% of all deaths) in comparison with other causes of death. The death rate of 1.79 per thousand was higher than for last year in the division (1.42). Of the 223 deaths recorded under this heading more than half i.e. 124, were attributed to chronic bronchitis. This disease is important not only as a cause of death but also as a cause of frequent and repeated illness and absence from work. Atmospheric pollution and cigarette smoking are heavily incriminated in its production and play a far more important role than working conditions, although in a coal mining area this latter factor should not be left out of the count.

### **Maternal Mortality :**

I am pleased to report that there were no maternal deaths recorded in the division in 1966.

## SECTION 'B'

General Provision of Health Services in the Area  
Staff at 31st December, 1966

Divisional Medical Officer and Medical Officer of Health :  
Dr. D. J. Cusiter

Divisional Nursing Officer :  
Miss V. Dunford

Senior Assistant County Medical Officers :  
Drs. D. M. Bell, S. K Pande, Margaret Bolsover.

### Part-time Medical Officers :

Drs. Barbara Demaine,	Jessica Core,
M. F. W. Bajorek,	W. R. Porter,
P. L. Baker,	Mary Scott,
B. R. Baker,	H. H. Smith,
I. Campbell,	J. Wilczynski.

Obstetrician :  
Dr. J. C. MacWilliam

Paediatrician :  
Dr. C. C. Harvey

Ophthalmologists :  
Miss M. A. C. Jones, Dr. S. K. Bannerjee.

Child Psychiatrist :  
Dr. J. D. Orme

Child Guidance :  
Mr. C. Pritchard, Mrs. R. I. Pilkington.

Health Visitors and Assistant Health Visitors :

Mrs. E. Appleyard,	Mrs. M. Mitchell,
Mrs. J. Brown,	Mrs. N. M. Noble,
Mrs. N. M. Dunford,	Miss M. O'Connor,
Mrs. G. I. Ellis,	Mrs. I. Pettman,
Miss L. Ferneyhough,	Mrs. E. Pocklington,
Mrs. M. Fisher,	Mrs. O. Smith,
Mrs. D. Goddard,	Miss M. Sorby,
Miss M. L. Hampshire,	Miss A. D. Willoughby,
Mrs. M. Jenkinson,	Miss H. Wray,
Mrs. M. M. Knowles,	Mrs. I. E. Milnes,
Mrs. G. Malpass,	Mrs. J. Hanmer,
Mrs. J. V. McLoughlin,	Mrs. I. Senior.

### Midwives :

Mrs. D. P. J. Butler,	Miss G. Randall,
Mrs. G. M. Corley,	Mrs. N. Roe,
Miss J. Dearden,	Mrs. A. E. Smith,
Mrs. O. D. Edwards,	Mrs. M. Smith,
Mrs. M. L. Green,	Mrs. D. A. Taylor,
Mrs. E. Gross,	Mrs. V. Tunney,
Mrs. A. Hessam,	Mrs. M. Venables,
Mrs. H. E. Hillery,	Mrs. R. Williams,
Miss K. A. A. Howland,	Miss D. A. M. Spencer,
Mrs. B. Hill,	Mrs. J. Godfrey.
Mrs. V. J. Marley,	

### District Nurses :

Mrs. M. Brooks,	Mrs. M. Herring,
Mrs. J. Cox,	Mrs. B. W. Hucknall,
Mrs. H. Dyson,	Mrs. A. Leavers,
Mrs. E. Elsworth,	Mrs. M. McCormack,
Mrs. R. Fairman,	Mrs. A. E. Moore,
Mrs. E. Firth,	Mrs. M. Probert,
Miss E. Gill,	Mrs. K. Roebuck,
Mrs. I. Goldsbrough,	Mrs. M. Waldron,
Mrs. N. Harrison,	Mrs. J. Wilson.

### Mental Welfare Officers :

Mrs. F. H. Redman,	Miss D. Bailey.
Mr. R. N. Halliday,	

### Training Centre :

Supervisor : Mrs. P. M. Winstanley

Mrs. J. Cavill,	Mrs. M. Gray,
Mr. D. Beevers,	Miss P. Peart,
Mr. T. Garbett,	Mrs. S. E. Norburn,
Mrs. E. Naylor,	Mrs. M. Rowbotham.
Mrs. I. Ardron,	

### Administrative and Clerical Staff :- Senior Clerks :

Mr. P. Goddard,	Mr. A. Wilkinson.
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### Sectional Clerks

Mr. E. K. New	Mr. H. Haigh.
Mrs. D. Billington.	

### Clerks :

Mrs. J. Gwynnette,	Mrs. H. Shirley,
Mrs. K. S. Hickling,	Mrs. P. A. Sturman,
Mrs. H. Mangham,	Miss S. A. Winder,
Mrs. A. Mann,	Miss S. Bennett,
Mrs. F. Shaw,	Miss J. Worton.

### Home Helps :

174 home helps



## LOCAL HEALTH AUTHORITY SERVICES

### Care of Mothers and Young Children - Section 22

#### Ante-Natal Clinics :

C.W.C. Welfare Avenue, Conisbrough.	Tuesday 2 - 4 p.m.	Dr. J. C. MacWilliam
C.W.C. Church Road, Denaby Main.	Wednesday 10 a.m. - 12 noon	do.
C.W.C. Welfare Park, Goldthorpe.	Thursday 2 - 4 p.m.	do.
C.W.C. Adwick Road, Mexborough.	Wednesday 2 - 4 p.m.	do.
C.W.C. Barbers Avenue, Rawmarsh.	Thursday 10 a.m. - 12 noon	Dr. Mary Scott
C.W.C. Rock House, Swinton.	Thursday 10 a.m. - 12 noon and 2 - 4 p.m.	Dr. H. H. Smith
C.W.C. off Houghton Road, Thurnscoe.	Friday 10 a.m. - 12 noon	Dr. J. C. MacWilliam
C.W.C. Church Street, Wath-upon-Dearne.	Friday 2 - 4 p.m.	Dr. Margaret Bolsover

#### Attendances :

Clinic	No. of patients who attended	No. of Attendances
Conisbrough ...	48	254
Conisbrough G.P. Clinic...	147	801
Denaby Main ..	104	617
Goldthorpe ...	123	395
Mexborough ...	57	335
Mexborough G.P. Clinic...	93	511
Rawmarsh Barbers Ave.	144	687
Rawmarsh Monkwood ..	13	100
Swinton ...	166	890
Thurnscoe ...	26	205
Wath-upon- Dearne ...	75	437
<b>TOTAL</b>	<b>996</b>	<b>5,232</b>

I am grateful for the co-operation and support received from Dr. J. C. MacWilliam who is Medical Officer in charge of the ante-natal clinics in the Conisbrough, Mexborough and Dearne areas and also holds an appointment as Senior Hospital Medical Officer at the Montagu Hospital, Mexborough.

There were 2,038 live and stillbirths in the divisional area in 1966 and 69% of all expectant mothers in the area attended the local authority ante-natal clinics at some time during their pregnancy.

#### Ante-Natal Relaxation Classes :

Relaxation classes are held at 7 centres which are listed below.

Clinic					No. of attendances
Goldthorpe	...	...	...	...	213
Mexborough	...	...	...	...	29
Rawmarsh	...	...	...	...	549
Swinton	...	...	...	...	256
Thurnscoe	...	...	...	...	217
Wath-upon-Dearne	...	...	...	...	363
Conisbrough	...	...	...	...	346
TOTAL					1,973

#### Family Planning Clinics :

The Mexborough branch of the Family Planning Association have the use of the Child Welfare Centre at Mexborough for their clinics. In addition to a grant from the West Riding County Council during 1966 the branch also received a donation of £20 from the Wath-upon-Dearne Urban District Council to help with problem family mothers in that area. Close co-operation between our health visitors and the family planning staff was maintained particularly with regard to this group of patients. Sessions are held each Tuesday evening from 6.15 p.m. to 7.30 p.m. with the exception of the month of August.

Forty-five sessions were held at which a total of 454 women attended. 178 of these were new patients.



Facilities were also available at the clinic for cervical smears to be taken as from April 1966 and 145 were taken during the nine months.

### Infant Welfare Clinics :

C.W.C. Conisbrough Monday 2 - 4 p.m.	Dr. M. Bajorek
C.W.C. Denaby Main Tuesday 2 - 4 p.m.	Dr. M. Bajorek
C.W.C. Goldthorpe Monday 2 - 4 p.m.	Dr. B. R. A. Demaine
C.W.C. Mexborough Tuesday 2 - 4 p.m. Thursday 2 - 4 p.m.	Dr. B. R. A. Demaine Dr. W. R. Porter
C.W.C. Rawmarsh (Monkwood) Thursday 2 - 4 p.m.	Dr. D. M. Bell
C.W.C. Rawmarsh (Barbers Avenue) Tuesday 2 - 4 p.m.	Dr. Jessica Core
C.W.C. Swinton Monday 2 - 4 p.m.	Dr. I. Campbell
C.W.C. Thurnscoe Monday 2 - 4 p.m. Tuesday 2 - 4 p.m.	Dr. J. Wilczynski Dr. G. C. McGlone
C.W.C. Wath-upon-Dearne Monday 2 - 4 p.m. Tuesday 2 - 4 p.m.	Dr. D. M. Bell (for both sessions)
C.W.C. Kilnhurst Wednesday 2 - 4 p.m.	Dr. Jessica Core

### Attendances :

Centre	No. of individual children who attended	Total No. of Attendances	
		Under 1 year	Over 1 year
Conisbrough .....	368	2683	486
Denaby Main .....	328	838	1109
Goldthorpe .....	420	1615	1213
Kilnhurst .....	219	648	1164
Mexborough .....	642	4756	1343
Monkwood .....	320	564	725
Rawmarsh .....	538	1288	1020
Swinton .....	764	2042	2765
Thurnscoe .....	749	2213	3145
Wath-on-Dearne .....	888	1944	2935
	5236	18591	15905

Attendances for 1966 showed an increase of 8% over the figures for 1965.

The increase is mainly in infants over one year of age. The number of individual children attending the clinics also showed a 19% increase over the previous year.

Infant Welfare clinics provide facilities for the examination of children of varying ages and for immunisation and vaccination. The opportunity is also taken by the health visitor to introduce health education activities during these sessions. A recommended range of proprietary foods and National Welfare foods are on sale at all clinics.

### **Premature Infants :**

A premature infant is one which weighs  $5\frac{1}{2}$  lbs or less at birth. This standard is a convenient one since the medical care of small babies whether they be premature or immature is along the same lines. It must be noted, however, that not all babies of this weight bear the same hazard. Observations on the risks of prematurity are included elsewhere in the preface to this report.

As in 1965 there were 149 premature births including eight sets of twins; 16 were stillborn. 18% of the premature babies were born at home and 82% in hospital. Of those born at home 4 weighed under 4 lbs, 22 premature babies died in the first four weeks of life; all in hospital.

# PREMATURE INFANTS BORN IN 1966

District	Born Alive			Stillbirths			No. removed to Hosp. After Birth	No. who survived 28 days		
	At Home	In Hosp.	Total	At Home	In Hosp.	Total		Born at Home	Born in Hosp.	Total
Conisbrough .....	4	18	22	—	2	2	1	3	13	16
Dearne .....	9	28	37	—	3	3	3	8	25	33
Mexborough .....	1	11	12	1	1	2	—	1	10	11
Rawmarsh .....	5	29	34	1	2	3	1	4	24	28
Swinton .....	1	11	12	—	2	2	—	1	6	7
Wath-upon-Dearne .....	5	11	16	—	4	4	—	4	12	16
TOTALS	25	108	133	2	14	16	5	21	90	111

## Care of the Unmarried Mother and Child :

130 illegitimate births were registered during 1966, representing 5.5% of all births.

### Marital Status :

#### (1) Married :

(a) with previous illegitimate children ...	11
(b) without previous illegitimate children ...	14

#### (2) Single :

(a) with previous illegitimate children ...	10
(b) without previous illegitimate children ...	55

#### (3) Widowed or Divorced :

(a) with previous illegitimate children ...	1
(b) without previous illegitimate children ...	2

### Age incidence :

(1) Under 15 ...	2
(2) Age 15 - 19 ...	35
(3) Age 20 - 24 ...	26
(4) Age 25 - 29 ...	15
(5) Age 30 - 39 ...	13
(6) Age 40 and over ...	2

The County Council scheme for the care of the unmarried mother and her child provides for financial responsibility to be accepted by the County Council for the maintenance of these unmarried mothers in welfare homes for a period of thirteen weeks, excluding the lying-in period. I am grateful to the social workers of the Doncaster and Sheffield Diocesan Moral Welfare Council for their co-operation and help during the year.

### Problem Families :

Three meetings of the co-ordinating committee were held during 1966. The committee meets under the chairmanship of the Divisional Medical Officer and consists of representatives from the Education Department, Welfare and Childrens Departments, Urban District Councils, Ministry of Social Security, National Coal Board, Probation Service, N.S.P.C.C. and Health Department.

The number of cases which can be adequately discussed at each meeting is limited and emphasis is therefore placed on those in which the County Council is making a rent guarantee

to the Urban District Council. The latter scheme provides breathing space in which the committee are able to make an assessment as to whether the parents are ready to accept and make use of the opportunities offered by various departments to establish themselves, or whether they are completely indifferent to the needs of their families. Whilst, however, the majority of cases assisted in this way have managed to pay their rent subsequently and show some improvement in their standards, other families have finally been evicted when the rent guarantee was withdrawn. By arrangement with the Treasurers of the Urban District Councils reports of rent arrears are submitted frequently to the Divisional Medical Officer relating to tenants who currently have their rent guaranteed by the County Council

### MIDWIFERY — SECTION 23

Twenty-one midwives were employed in the divisional area at the 31st December 1966. Although the authorised divisional establishment is 24 no action was taken to replace staff who retired or resigned as this was not justified.

The number of home confinements continued to decrease and only 34% of the 2,072 live and stillbirths in the division during 1966 were delivered at home. It is pleasing to note that the ratio of institutional births in this area is now nearing the 70% recommended by the Cranbrook Committee in its report on the maternity services.

General practitioners were present at 106 of the 697 confinements which took place at home and medical aid was requested on 60 occasions. Midwives attended 147 mothers who were delivered in institutions but discharged after forty-eight hours, a further 172 who were discharged up to and including the fifth day and 252 who were discharged between the fifth and tenth day. The average number of confinements attended by each midwife during 1966 was 33. All midwives are authorised to use their private motorcars on official business and in common with other local authorities the County Council operate an assisted car purchase scheme for staff qualified as 'essential users'.

I would like to record my thanks to Miss Vernon, Mrs. Stott and Mrs. Tunney who retired during the year after many years of faithful service in the area.

Refresher courses were arranged for those members of the staff who were required to attend in accordance with Section



'G' of the rules of the Central Midwives Board, and five midwives attended such courses in 1966. The County Council also provide courses of instruction for midwives at their Adult College at Grantley Hall, and two midwives from this division attended during the year.

In 1966 a portable incubator built to specification laid down by the County Council was put into use in the divisional area. This can be heated from the battery of the ambulance and is used for the transport of small babies from home to hospital or between one hospital and another. All midwives were instructed in its use and each midwife is called upon in turn to arrange for its maintenance and ensure its readiness in case of need. Two sorrento cots are also kept at the ambulance depot to facilitate the nursing of small babies at home or for other emergency use.

#### Visits :

		Ante-Natal	Post-Natal
Domiciliary cases	... ..	5,434	10,073
Hospital cases	... ..	1,481	2,757
		<hr/>	<hr/>
		6,915	12,830
		<hr/>	<hr/>

### HEALTH VISITING — SECTION 24

The health visitor's duties have undergone great change during recent years. Possibly only about one third of her time is now devoted to the routine visiting of infants, and she is more concerned with care and after-care, prevention of illness and health education for the family as a whole.

All health visitors in the division are attached to general practitioners but the extent of this liaison varies from practice to practice. In some areas this consists of only weekly visits by the health visitor to the surgery and occasional telephone contact, whilst at the other end of the scale many doctors rely heavily on the health visitor to seek solutions to the many social problems of their patients. With the shortage of geriatric beds in the area and the continued lack of places in residential accommodation it follows that the main problems are with the care of the aged patient.

Three health visitors attend five hospitals in the area on liaison duties and two other health visitors attend in similar capacity at the chest clinic. Further details of these duties are included later in this report under the heading of Care and After-care.

The health visitors in this division have a dual role of school nurse and, therefore, assist at school medical inspections, vaccination and immunisation sessions in school, carry out cleanliness surveys and routine audiometry testing and many other duties which fall to the lot of the school nurse.

All immigrants entering the area and notified to this department by Sea and Airport Authorities are visited by the health visitor who gives advice regarding the medical and other essential services available to them. In this connection use is made of a card printed in English, Hindi, Urdu and Arabic.

All home accidents reported to the department by the various hospitals are investigated by the health visitor to ascertain the cause of the accident and advise on suitable measures to prevent recurrence.

In September 1966 a new training school for health visitors was opened in Sheffield. Two of our staff are designated as fieldwork instructors and they supervise the field training of students attending both the Sheffield and Leeds health visitor training centres. The department also helps with the training of student hospital nurses from the Rotherham training school. Five health visitors from this division attended Refresher Courses at the County Council Adult College at Grantley Hall during 1966, and eight attended a course of instruction in the Ascertainment of Deafness in Young Children conducted by Professor and Lady Ewing of Manchester University. All of the qualified health visitors in this division have now attended such a course. Other lectures have been arranged for the staff and regular divisional meetings are held to discuss current topics and common problems.

There are 24 nurses employed in the health visiting service at the 31st December 1966: 18 of whom were fully qualified.

The following is an analysis of the work undertaken by health visitors during 1966.



## Visits :

Expectant mothers	...	...	...	132
Children under 1 year	...	...	6,062	
Children aged 1 - 2 years	...	...	4,793	
Children aged 2 - 5 years	...	...	9,024	
			<hr/>	19,879
Tuberculosis households	...	...		484
Other cases	...	...	...	9,997
School health cases	...	...	...	1,022
Ineffective	...	...	...	4,015
			<hr/>	
			Total	35,529
				<hr/>

## Clinic and School Sessions :

Maternity and Child Welfare	...	...	...	2,036
Ultra Violet Light...	...	...	...	—
Specialist - Chest	...	...	...	9
Specialist - Other	...	...	...	238
School Health	...	...	...	1,022
			<hr/>	
			Total	3,305
				<hr/>

## HOME NURSING — SECTION 25

The staff of the home nursing service at 31st December 1966 consisted of 18 full time and one part-time nurse. The staff who are able to drive cars are either authorised to use their own vehicles on official business or have been provided with County owned vehicles.

A day and night sitting service has been established to provide relief for relatives nursing terminal illnesses. The service in this division has mainly been confined to night work and the majority of cases nursed were terminal cases of cancer. In 1966 five cases were helped and 208 hours of assistance was given at a cost of £62 10s. 0d.

The following are statistics relating to the work of the home nurse in 1966. It will be noted that they made 53,843 visits to 1,112 patients. Whilst the number of patients nursed fell by 150 compared with 1965, the number of visits showed an increase of 4,800. Over half of the patients were aged 65 or over and they were visited on 34,549 occasions. 572 patients had more than 24 visits each during the year.

### Case Summary :

Classification	No. of cases attended	No. of visits made
Medical .....	1,345	42,968
Surgical .....	334	8,518
Infectious Diseases .....	11	101
Tuberculosis .....	18	1,233
Maternal complications .....	58	510
Other .....	46	513
<b>TOTALS:</b> .....	<b>1,812</b>	<b>53,843</b>
Patients included above who were aged 65 or over .....	1015	34,549
Children included above who were under 5 or less .....	46	468
Patients included above who have had 24 visits or more .....	572	37,412

Of the total of 1,812 patients nursed during the year 1,245 cases were completed by the 31st December 1966. The main categories of diseases for which these patients were treated included respiratory diseases 212 (i.e. bronchitis, pneumonia but not tuberculosis), anaemias 88, complications of pregnancy 50, skin diseases 71 (i.e. boils, carbuncles, etc.), constipation 67, diseases of the heart and arteries 107. The treatment consisted of injections in 484 cases and general nursing in 434 cases. Antibiotics were administered by injection in 259 cases and drugs for anaemias accounted for 119 cases in which injections were given. 7,435 visits were made by home nurses for the sole purpose of giving injections.

## VACCINATION AND IMMUNISATION — SECTION 26

### Smallpox Vaccination

Age at 31/12/66	Under 1 1966	1—4 1962/65	5—14 1952/61	15 or over before 1952	Total
No. Vaccinated					
Dearne .....	1	83	30	24	138
Conisbrough .....	—	57	1	2	60
Mexborough .....	2	55	11	41	109
Wath .....	—	63	33	78	174
Swinton .....	1	94	19	27	141
Rawmarsh .....	2	73	22	7	104
Total .....	6	425	116	179	726
No. Re-vaccinated					
Dearne .....	—	—	12	33	45
Conisbrough .....	—	—	—	—	—
Mexborough .....	—	—	4	24	28
Wath .....	—	—	1	15	16
Swinton .....	—	2	3	12	17
Rawmarsh .....	—	1	4	4	9
Total .....	—	3	24	88	115

The number of persons vaccinated in 1966 shows an increase of over 100% on the total for 1965. It is pleasing to note 425 infants between the ages of one and four years were vaccinated against a total of 260 for the previous year.

### Diphtheria Immunisation

Urban District	No. of children primarily Immunised			No. of children given booster doses during 1966
	Under 5 yrs.	5—14 years	Total	
Conisbrough	248	—	248	143
Dearne .....	332	—	332	4
Mexborough	243	1	244	103
Wath .....	287	8	295	70
Swinton .....	270	13	283	152
Rawmarsh .....	262	6	268	66
Total .....	1642	28	1670	538

The immunisation rate in this division is at a satisfactory level and no cases of diphtheria have been reported for some years.

Poliomyelitis Vaccination

	No. of persons completely Vaccinated during 1966		Total persons completely Vaccinated	
	3 Dose	4 Dose	3 Dose	4 Dose
Children born in years 1951 — 1966 .....	5677	946	31610	8774
Young Persons .....	551	61	15669	2422
TOTAL .....	6228	1007	47279	11196

Vaccination against poliomyelitis in this division is carried out solely by means of oral vaccine and no supplies of salk vaccine for use by injection were obtained during 1966.

Last year I reported on the efforts made in the division to achieve a higher rate of immunisation amongst school children. The 98% acceptance rate has been maintained amongst school children and concerted efforts by the health visiting staff have resulted in an increased rate of vaccination amongst pre-school children. Of the estimated child population in the division of 33,000, 31,610 have been completely vaccinated representing a rate of 96%.

AMBULANCE SERVICE — SECTION 27

The local ambulance station is situate at Dunford House, Wath-on-Dearne adjacent to the Divisional Health Office. The Station Officer Mr. H. Godly has kindly supplied me with the statistics listed below. The staff of 31 includes 23 male driver-attendants, one female driver-attendant, 5 male shift leaders and 2 clerk/telephonists :—

No. of patients conveyed ... ..	42,659
No. of journeys ... ..	7,026
Total mileage 1.1.66 to 31.12.66 ... ..	214,337

Details of journeys :

No. of patients to out-patient clinics ... ..	33,721
No. of patients for admission to hospital ... ..	3,798
(2,126 emergencies)	
No. of patients for discharge from hospital ... ..	2,946
No. of patients transferred from hospital to hospital ... ..	1,056
No. of patients from accidents ... ..	838
Total	42,359

There are 8 vehicles stationed at Wath-on-Dearne all equipped with short wave radio communication sets.

One third of the staff have received two weeks training at the new Ambulance Training School, Elm Bank, Cleckheaton. The syllabus of this training course includes all aspects of ambulance aid, anatomy and physiology treatment, artificial respiration and driving skills.

The ambulance depot telephone number is Wath 2234/5 night and day, and any person can order an ambulance for an accident or emergency childbirth where it is apparent that emergency hospital treatment is required. The Women's Voluntary Service are also called upon during emergencies to convey sitting patients.

Out-patients form the great majority of ambulance patients, and the number of patients conveyed during 1966 showed an increase of 4,000 on the previous year. The number of journeys undertaken was 300 more than in 1965 and the mileage increased by 8,000 miles.

## **PREVENTION OF ILLNESS—CARE AND AFTER CARE SECTION 28**

### **Nursing Equipment in the Home**

1,300 issues of various forms of nursing equipment were made in 1966. A full range of smaller items is readily available from the home nurse or from stocks held at child welfare centres. Larger items of equipment which are not immediately available can be obtained at reasonably short notice.

More and more use is made of disposable items of equipment.

### **Hospital After-care**

The following hospitals are attended by health visitors each week :—

Montagu Hospital, Mexborough

Fullerton Hospital, Denaby Main

Wathwood Hospital, Wath-upon-Dearne

Doncastergate Hospital, Rotherham

Moorgate Hospital, Rotherham



## Tuberculosis After-care

A close liaison is maintained between this department and Dr. J. D. Stevens, Consultant Chest Physician at Mexborough Chest Clinic. Miss L. Ferneyhough a health visitor from Thurnscoe visits the Chest Clinic at regular intervals for the purpose of exchanging information regarding notified cases and the follow-up of contacts. A register is maintained in the Divisional Office as a result of this liaison, to which interested members of the staff have access. A second health visitor Mrs. G. I. Ellis attends the weekly session held at the Chest Clinic for children. Patients from the Rawmarsh Urban District are seen at Rotherham Chest Clinic (Consultant Chest Physician Dr. A. C. Morrison) and a health visitor from a neighbouring division acts as a link with this clinic.

202 new contacts were examined at Mexborough Chest Clinic in 1966 as a result of the follow-up of 22 newly notified cases of tuberculosis. 28 were men, 56 women and 118 children.

Following the discovery of a case of primary tuberculosis in a school boy as a result of heaf testing for B.C.G. vaccination, 31 immediate contacts and 24 school staff were followed up. 23 of the pupils were heaf negative and were given B.C.G. vaccination followed by chest x-ray at the Mass Radiography Unit where all the teaching staff attended too; all proved to be clear. Eight pupils who were heaf positive were referred to the Chest Clinic for further investigation but nothing abnormal was detected, although some are still under observation.

No employment difficulties have been encountered in respect of known cases of tuberculosis.

2,193 children were offered heaf testing during 1966 and an acceptance rate of 88% was achieved; an increase of 8% over 1965 and 18% over 1964. The incidence of negative reactors in the schools was within the national average. The number of positive reactors referred for chest x-ray i.e. grade 3 or 4, was also within normal limits.

The South Yorkshire area Mass Radiography Unit held public sessions at the Baths Hall Denaby Main, Miners Welfare Hall, Conisbrough, Child Welfare Centre, Mexborough, C.W.S. Factory, Bolton-on-Deerne, N. Corah Ltd., Bolton-on-Deerne and at the Welfare Hall, Goldthorpe during 1966. There were 6,064 x-rays carried out and a total of 254 abnormalities were discovered.

The following is a summary of the abnormalities discovered :—

Abnormalities of the Bony Thorax and Soft Tissues—Congenital .....	14
Bacterial and virus infections of the lungs.....	9
Bronchiectasis .....	8
Emphysema .....	8
Pulmonary fibrosis—non-tuberculosis.....	27
Pneumoconiosis—not previously certified.....	65
Pneumoconiosis—previously certified.....	10
Benign tumours of the lungs and mediastenum	1
Carcinoma of the lung and mediastenum.....	3
Sarcoidosis and collagenous disease.....	2
Pleural thickening of calcification— non-tuberculosis .....	21
Abnormalities of the diaphragm and oesophagus; congenital and acquired.....	2
Congenital abnormalities of heart and vessels...	3
Acquired abnormalities of heart and vessels.....	32
	<hr/>
	205
	<hr/>

The Rotherham and Doncaster Care Committees have provided personal clothing for families where a need exists and when the recommendation is supported by the Chest Physician.

All the district councils allow priority of housing on the recommendation of the Medical Officer of Health for active cases of pulmonary tuberculosis where the Medical Officer considers that their present housing accommodation is inadequate.



## Chiropody :

The following is a summary of treatments provided during 1966 by the various agencies or by direct service :—

### Summary of treatments :

Voluntary Association	Total Sessions	No. of Patients treated			No. of attendances
		Domi-ciliary	Non-Domi-ciliary	Total	
Bolton-on-Dearne O.A.P. Association .....	190	129	383	512	2532
Goldthorpe O.A.P. Association .....					
Thurnscoe O.A.P. Association .....					
Thurnscoe W.V.S. ....					
Conisbrough & Denaby Main O.A.P. Welfare Committee .....	110	113	304	417	1271
Mexborough Old Folk's Welfare Committee.....	207	93	367	460	2340
Swinton Aged Peoples Welfare Committee.....	134	75	267	342	1572
Rawmarsh Aged Peoples Welfare Committee.....	220	194	388	582	2741
Wath-on-Dearne Aged Peoples Welfare Com'tee	154	171	260	431	2209
Total .....	1015	775	1969	2744	12665

## Cervical Cytology :

Arrangements were made in April 1966 with Dr. G. D. Powell, Pathologist, Moorgate General Hospital, Rotherham to accept smears from patients in this area. The service commenced in a small way in June 1966 but the response so far has been disappointing.

This measure is designed to detect changes in the cells of the cervix which if left undiscovered might possibly lead to malignancy at a later date. At the same time as the smear is taken examination is made of the abdomen, pelvic organs and breasts.

Seventeen sessions were held at three centres at which 95 women attended. There were no positive or doubtful smears but one patient was referred to her family doctor for investigation of a breast abnormality.

### Phenylketonuria :

Every effort is made by the health visitor to test babies for phenylketonuria between the ages of four to six weeks. In 1966 2,079 babies were tested, one of which showed a positive reaction. The diagnosis was not confirmed as positive on serum testing at the hospital laboratory.

### National Assistance Act, 1948 - Section 47

This section of the Act is concerned with the compulsory removal of persons in need of care from their homes on a Court Order or in an emergency on an Order signed by two medical practitioners and a Justice of the Peace.

Such person may be removed to a County Home or hospital, provided that all the sections of the Act are satisfied. It was not necessary to take any action under this section in 1966.

### Joint Wardens Schemes for the supervision of the aged :

The scheme, organised jointly by the county council and the local district councils, provides for the supervision by wardens of aged persons, both in units or other purpose-built accommodation and in ordinary dwellinghouses. The wardens may or may not be resident. In all cases, the wardens are provided with a telephone, an illuminated sign where this is necessary, and are paid a salary, the amount of which is at the discretion of the local district council. In those circumstances where the warden is non-resident, it is their duty to visit one each day and to direct the help of the appropriate agency where this is required. No physical help, other than in an emergency is required of the warden.

During 1966 arrangements were made in some areas for the appointment of wardens to cover persons living in privately owned houses.

Details of all warden schemes including those provided by the district council in their own housing units and privately owned houses are shown below :—

Conisbrough :

2 Wardens Bungalows—

Shepherds Close,  
Denaby Main.

Coronation Cottages,  
Conisbrough.

Flats, Marchgate,  
Conisbrough.

1 Warden for private houses in Denaby  
Main.

Dearne :                      8 Wardens Bungalows—  
    Chestnut Grove,  
    Thurnscoe.  
    Low Grange,  
    Thurnscoe.  
    Market Square,  
    Goldthorpe.  
    King Street,  
    Goldthorpe.  
    Green Gate Close,  
    Bolton-on-Dearne.  
    Goldthorpe Road,  
    Goldthorpe.  
    Houghton Road,  
    Thurnscoe.  
    Flatlets, Windsor Court,  
    Thurnscoe.

Mexborough :              4 Wardens Bungalows—  
    Pitt Street, Mexborough.  
    Crossgate and  
    Montagu Street,  
    Mexborough.  
    Highwoods Road,  
    Mexborough.  
    Oak Close, Mexborough.  
    2 Wardens Flats—  
    Maple Leaf Court,  
    Mexborough.  
    Hallgate, Mexborough.

There are also 7 wardens for private properties in Mexborough.

Rawmarsh :                1 Warden Bungalow—  
    Greenfield, Rawmarsh.

Swinton :                    6 Wardens Bungalows—  
    St. Johns Road, Swinton.  
    St. Mary's Crescent,  
    Swinton.  
    Brameld Road Swinton.  
    Highfield Farm, Swinton.  
    Meadow View, Kilnhurst  
    and Kilnhurst Warden  
    Scheme.

## Wath-upon-Dearne : 7 Wardens Bungalows and Flats—

Almond Place,  
Wath-upon-Dearne.

Varney Road,  
Wath-upon-Dearne.

Cemetery Road,  
Wath-upon-Dearne.

Mount Pleasant Road,  
Wath-upon-Dearne.

Coleridge Road,  
West Melton.

Stokewell Road,  
West Melton.

Tennyson Rise,  
West Melton.

## Meals on Wheels :

This service is provided to persons of pensionable age who are suffering from malnutrition or who are unable to cook their own meals due to disability or illness and have no-one else to cook their meals for them. Containers for the service are provided by the County Council who also subsidise the meals as necessary. The recipient is charged 1s. 0d. per meal.

Urban District	No. of Persons	Frequency	Total meals Weekly
Conisbrough	60	Twice weekly	120
Dearne	48	Four days a week	192
Mexborough	96	Twice weekly	192
Rawmarsh	50	Twice weekly	100
Swinton	48	Twice weekly	96
Wath-on-Dearne	42	Twice weekly	84
<b>TOTALS</b>	<b>344</b>		<b>784</b>

## Health Education :

### Schools :

A series of at least six health education lectures have been given to female school leavers in all our secondary modern schools. Although the same pattern of lectures are given, the extent of the periods during which they are given varies in different schools.

Whilst one health visitor gives a continuous set of lectures in one term to all leavers, another health visitor may spread her lectures throughout the whole year. This depends on the school programme and on the number of leavers in the school. It is during these periods that parents of school leavers are invited to the school to see some of the films shown to the girls and also to discuss problems of their teenage children with the doctor, the health visitor, the Nursing Officer and the school staff.

As many as 40 parents have been present this year at one session but again this depends on the type of area. During these sessions of health education lectures the students are introduced to the various members of the Public Health team, e.g. Midwives, Home Nurses and Public Health Inspectors. The health visitor also tries to meet parents of children who are admitted to the secondary modern schools. Talks on personal and general hygiene are given to these entrants.

Unfortunately opportunities are not available for the introduction of health education to Grammar School children because of the school syllabus. There are two large grammar schools in this division. The health visitor and the doctor only see these children at school medical inspections where problems can be freely discussed, and should the parents be present they are advised to see the health visitor at any time at the clinic.

We would like to meet parents before children leave the junior school and also to give personal hygiene lectures to girls particularly, but personal hygiene films cannot be shown in schools, as few if any junior schools in this division have a room which can be blacked out.

Sex education is not taught by the public health staff, and there has been no large scale anti-smoking campaign during this year.

Home accident prevention has been the main topic of our programme to school children and to parent group meetings during 1966.

#### Clinics :

Ante-natal: Relaxation classes combined with health education continue to be held in eight of our ten clinics.

Child Welfare Clinic: Displays and posters with numerous handouts are always in our clinics. We are unable to show film strips or films during our clinic sessions but health visitors hold group discussions.



**Mothers Clubs:** We have three very flourishing Mothers Clubs which meet fortnightly. One member of the health staff is always present. Towards the end of 1966 another Mothers Club was due to open at Monkwood. Mexborough is the place where a Mothers Club would flourish but due to the General Practitioner surgeries and Family Planning Clinics we are not able to do so. There is no session during the day when the clinic is free.

### **College of Education :**

A series of lectures have been given to the student teachers at the local college.

### **Mental Health :**

The mental health social workers hold a psychiatric social club at Wath Clinic and health visitors are often asked to join in their sessions.

I would like to take this opportunity to thank the Health Education Officer and her staff for all the help that has been given to us during 1966, for the displays, posters, hand-outs, films and filmstrips provided for us in a most efficient manner.

## **DOMESTIC HELP SERVICE — SECTION 29**

Establishment of domestic helps..... 93.25

No. of domestic helps employed at 31.12.66 part-time ..... 174  
(equivalent of 90.5 full time)

Groups receiving assistance:—	No. of Cases	Hours
(1) Maternity (including expectant mothers) .....	47	1,943
(2) Chronic sick		
(a) aged 65 plus.....	1,265	172,337
(b) aged under 65 and tuberculosis .....	115	9,940
(3) Others .....	35	3,508
(4) Mentally disordered .....	9	613
Totals	<u>1,471</u>	<u>188,341</u>



The provision of domestic help is based on a medical certificate from the family doctor and may be provided for the ill, aged, mentally defective, or to care for young children in the absence of the mother in hospital. The service is also provided when required for expectant mothers before, during, and after confinement.

The home help service is not a free service, each applicant is required to complete a form giving details of their financial circumstances and the charge is assessed after consideration of these details. Persons in receipt of a Supplementary Pension from the National Assistance Board are not charged.

In exceptional circumstances, and where this is authorised by the Divisional Medical Officer and the County Medical Officer, a twenty-four hour service can be provided.

Demand for this service continued to rise during the year and the equivalent of 13 extra full time home helps were required, and additional 20,000 hours of assistance was given compared with 1965.

## MENTAL HEALTH SERVICE

### Subnormal or Severely Subnormal :

Number under care and guidance	...	...	578
Number of ascertainments	...	...	13
Number attending training centre	...	...	127

### Mentally Ill :

Number discharged from psychiatric hospital	...	122
Number requiring after-care	... ..	566
Number of visits involved for after-care and patients referred from out-patient clinics	...	3,421
Number of cases referred to out-patients psychiatric clinics	... ..	64
Number referred to rehabilitation centres	...	11
Number referred to Youth Employment Office under 17 years of age	... ..	8

## Out-Patients Clinics :

Monday, Wednesday

Barnsley Beckett Hospital  
Consultant, Dr. M. Jeffrey.  
Mrs. F. H. Redman attends.

Monday, Thursday

Mexborough Montagu Hospital  
Consultant, Dr. N. L. Gittleson.  
Mr. R. N. Halliday attends.

Friday

Doncaster Royal Infirmary  
Consultant, Dr. M. Jeffrey.  
Miss Bailey attends for training purposes.

## Mentally subnormal patients not attending training centre :

Males	...	...	...	...	24 working full-time, 1 part-time.
Females		...	...	...	15 working full-time,
Males occupied at home				...	29
Females occupied at home				...	42

The need for community care of the mentally disordered is now well established, and the National Health Service Act of 1948 and the Mental Health Act, 1959 together offer ideal opportunities to provide that care in a most comprehensive and informal way.

The hospital plan and the Local Authority Health and Welfare plan together indicate the need, aims and benefits of community care, co-operation, understanding, communication and liaison between all agencies, whether statutory or voluntary will bring about a more complete community service, so balanced, that speedy medical and psycho social treatment will result in the effective rehabilitation of those among us whose misfortune it has been to suffer from a mental illness.

The Psychiatric "Rock" Club which commenced in August 1961 is but one example of how community services can work together. Its success can only be measured by the amount of interest shown by individual club members, coupled with the effective return of many of them to establishing a more rational and meaningful life.

The Club's aim is to meet as many as possible of the needs of the mentally disordered who, living within reasonable travelling distance, are able to reach the Club on their own initiative and where the services of the Club are considered socially to be of therapeutic value. The Club which has 70 members—an average attendance of 45 during the year—demonstrates how many of these needs are being met by group activities in an acceptable setting and where social needs of rehabilitation are given priority.

Meetings are held fortnightly and activities are many and varied, ranging from table tennis, darts and card games to vocational and recreational outings. Amidst all this intensive, yet friendly activity, an informal contact is made by Social Workers, and personal interviews are possible at all times. A good Staff to patient ratio is found necessary and we are fortunate in the invaluable assistance given by Voluntary Associations, e.g. members of the Townswomen's Guild, Youth Club Members of the Trinity Methodist Church and numerous other voluntary helpers.

During the early part of the year it was felt that some patients needed more help than the fortnightly meeting offered. Discussions took place with the Heads of Department of the Rockingham Institute of Further Education and it was arranged to commence a scheme of afternoon sessions where various crafts were introduced, e.g. millinery, dressmaking, art and embroidery, were suggested. Three teachers with a fund of kindness and a tolerance of mental illness were specially chosen. The classes commenced with 18 patients and since June an average of 24 patients have attended these weekly sessions regularly. These patients are now requesting more classes to be arranged and it would appear there is now the need for establishing a day centre to fill this need. In this way an inexpensive yet invaluable service can be offered to Society.

Patients are referred to the Classes and the Club by the Psychiatric Hospital and by Psychiatrists attending Outpatient Departments in the area. In many cases the patients have not required hospital treatment.

## Training Centres

There were 127 trainees on the roll at the Training Centre at the 31st December 1966.

Care Unit: This special unit which has provision for 12 severely subnormal patients is proving a great success. Parents are eager to accept this social service which provides care during the day for patients for whom the parents do not

wish permanent hospital care. These patients are cared for by experienced staff one of whom has nursing qualifications. They are conveyed to the centre each day in mini-buses which have been provided with special harnesses and paid escorts provided.

**Junior Wing:** The junior wing is divided into four groups responsible for children between the ages of 4 to 7 years, classes for the 7 to 9 year olds and thus 9 to 12 year age group followed by a transition class for trainees between the ages of 12 and 16 years. The trainees in this latter group are gaining experience which will benefit them when they are admitted to the senior section which includes the workshops.

Modern methods are used in their training including creative activities and social training. The trainees are encouraged to do a limited amount of shopping and to take walks in local parks with escorts.

**Senior Wing:** Trainees in the senior wing are introduced as soon as possible to the workshops where during the year production continued of curtains, pinarettes, feeders, bean bags, tea towels, cowrie shell bags, workholder cases, files, library ticket holders, corner flags, first-aid boxes, clothes horses, dolls cots, hollow wooden blocks, playhouse screens, clay boards, test-tube racks, clothes props, etc. for the County Supplies Department. The senior girls are also engaged in laundry work for the centre itself and for the divisional health office, whilst the senior boys are responsible for the maintenance of the grounds at the centre. An incentive pay award is made to all trainees engaged on industrial work over the age of 16 years, ranging from 7s. 6d. per week to £1 per week.

In the junior wing social training is included in the curriculum and outings are arranged during the summer months.

A modern all electric kitchen at the centre provides meals for all trainees for which a charge of 1s. 0d. per day is made. Free meals are allowed where the financial circumstances of the family demand.

There is an active Parent Teachers Association which meets bi-monthly at the centre has benefit by gifts from this organisation as well as the Wath and District and Mexborough branches of the society for mentally handicapped children. The employees of the Manvers Main Coking plant generously donate a portion of their profits from the sale of 'Coal News' to the centre.



## SCHOOL HEALTH SERVICE

The staffing position in the school health service during 1966 has been satisfactory; this has been supplemented by the employment of a retired Assistant County Medical Officer and general practitioners on a part-time basis.

Routine school medical inspections have continued with examinations of school entrants, first year secondary pupils and school leavers. Other special medical inspections and re-inspections are arranged as necessary.

Table I

### Inspection of School children 1966 :

Entrants	...	...	...	...	2,494
First Year Secondary	...	...	...	...	1,142
Last Year Secondary	...	...	...	...	1,024
					Total
					4,660
No. of Special Inspections	...	...	...	...	1,218
No. of Re-inspections	...	...	...	...	42
					Total
					1,260
Total Inspections					5,920

### Physical Condition of Pupils Inspected :

Satisfactory	...	...	...	...	99.5%
Found to require treatment	...	...	...	...	8.6%

The percentage of pupils found to be satisfactory on examination compares favourably with that for England and Wales and for the County as a whole. The percentage requiring treatment is also about the national average.

Table II

Cleanliness and Head Infestation :

Total no. examinations made for this purpose	19,210
Total no. found infested ... ..	528
Total percentage found infested ... .. (West Riding 1.9%)	2.7%

Table III

Care of Handicapped Children :

Milton Day School—E.S.N. ... ..	100
Residential School—E.S.N. ... ..	3
Residential School—Deaf or Partially Deaf ...	15
Residential School—Deaf E.S.N. ... ..	—
Residential School—Blind ... ..	4
Residential School—Partially Sighted ... ..	3
Residential School—Delicate ... ..	13
Residential School—Cerebral Palsy ... ..	10
Residential School—Physically Handicapped excluding Cerebral Palsy ... ..	5
Residential School—Epileptic ... ..	—
Residential School—Maladjusted ... ..	11
<hr/>	
Total	164
<hr/>	

The number of handicapped children at special schools remains at a constant level although during 1966 the number admitted to residential schools for the delicate and residential schools for the maladjusted increased two fold.



Table IV

B.C.G. vaccination 13 years and older school children :					
No. of children offered testing and vaccination if necessary	...	...	...	...	2,193
No. of acceptances	...	...	...	...	1,893
Percentage of acceptance	...	...	...	...	88.16%
Pre-vaccination Tuberculin Test :					
No. tested	...	...	...	...	1,641
Result of Test :					
No. Positive	...	...	...	...	306
No. Negative	...	...	...	...	1,268
No. Not ascertained	...	...	...	...	67
Percentage Positive	...	...	...	...	20.19%
No. Vaccinated	...	...	...	...	1,268

The acceptance rate for B.C.G. vaccination increased by 9% in 1966 and the level of 88.2% is satisfactory but I would be happier to see a 100% rate as the occasional case of pulmonary tuberculosis amongst adolescents is still being notified.

Table V

Audiometry :					
No. tested	...	...	...	...	1,330
No. with no loss	...	...	...	...	1,175
No. referred to School Audiology Clinic	...	...	...	...	155

The Consultant Paediatrician, Dr. C. C. Harvey is available for consultation and sees cases referred by both the school health service and the family doctors, and I am most grateful for his help during the year. Dr. J. D. Orme is Consultant in charge of the Child Guidance Clinic and his help is invaluable. The division is also fortunate in having the services of Miss M. A. C. Jones, Consultant Ophthalmologist and Dr. S. K. Bannerjee, to whom all visual defects are referred. I am grateful also to the school medical officers both whole and part-time for the performance of their duties during the year.

## HOSPITAL SERVICES

The hospital services for the area are administered by the United Sheffield Hospitals, Sheffield Regional Hospital Board, with the following hospital management committees; Sheffield No's. 1, 2 and 3, Rotherham, Barnsley and Doncaster.

### General hospital services :

Sheffield Royal Hospital  
Sheffield Royal Infirmary  
Sheffield City General Hospital  
Rotherham Moorgate and Doncaster Gate.  
Hospitals  
Barnsley Beckett and St. Helen Hospitals  
Doncaster Royal Infirmary  
Mexborough Montagu Hospital

### Infectious Diseases hospital services :

Kendray Isolation Hospital  
Doncaster Tickhill Road Hospital  
Sheffield Lodge Moor Hospital

### Maternity hospital services :

Sheffield Jessop Hospital  
Rotherham Moorgate Hospital  
Mexborough Montagu Hospital  
Barnsley St. Helen Hospital  
Listerdale Maternity Home

### Chest Clinics :

Mexborough Chest Clinic—Dr. J D. Stevens.  
Rotherham Chest Clinic—Dr. A. C. Morrison

### Laboratory Services :

Bacteriological examinations are carried out at the Public Health Laboratories at Wakefield (Director: Dr. L. A. Little) and at Sheffield (Director: Dr. E. H. Gillespie).

Sections 'C', 'D' and 'E' have been supplied by the Chief Public Health Inspector, Mr. Swift.

## SECTION "C"

### General Environmental Circumstances of the Area

#### General District Inspections

The normal routine work of investigation of complaints, with the follow up of notices, further inspections and supervision of work was carried out fully, as the following statistics show:—

Complaints investigated	...	...	...	260
Water Supply	...	...	...	20
Drainage	...	..	...	70
Tents, Vans and Sheds	...	...	...	20
Factories	...	...	...	20
Theatres and Licensed Premises	...	...	...	30
Public Cleansing	...	...	..	170
Rodent Control	...	...	...	30
Atmospheric Pollution	...	...	...	270
Schools	...	...	...	12
Shops	...	...	...	225
Miscellaneous Sanitary Visits	...	...	...	150
Hairdressers	...	...	...	12
Enquiries re Infectious Diseases	...	...	...	18
Miscellaneous Infectious Disease Visits	...	...	...	12
Inspection of Food Premises (see Section 'E')	...	...	...	975
Housing Letting	...	...	...	150

#### Service of Notices and Abatement of Nuisances

As a result of the service of 42 informal notices and 6 formal notices under Section 93 of the Public Health Act 1936, the following nuisances were abated in dwelling houses:

## Drainage

Obstructions removed and drainage repaired ...	6
Drains relaid, renewed or extended ... ..	4
New gullies provided ... ..	2
Rainwater drainage repaired or renewed ...	14
Sink waste pipes repaired ... ..	12
Insanitary sinks replaced ... ..	4
Insufficient or dilapidated W.C. accommodation	5

## Repairs to Premises

Chimneys rebuilt, pointed and chimney pots replaced ... ..	5
Roofs repaired ... ..	25
External wall repaired and/or pointed ... ..	30
Ceiling plaster repaired ... ..	30
Wall plaster repaired ... ..	28
Defective flues repaired ... ..	5
Internal floors repaired or replaced ... ..	8
Repairs to stairs, handrails, doors, windows etc.	32
Insufficient and/or defective ventilation ...	1
Re-paved and/or repaired yard surfaces ...	4
Burst water pipes repaired ... ..	24
Verminous premises ... ..	2
Miscellaneous matters ... ..	30

## PUBLIC CLEANSING

The collection and disposal of refuse continued under the control of the Chief Public Health Inspector. A labour force of 19 men, including drivers, loaders and tip attendant together with a fleet of five vehicles and a tracked bulldozer were employed for this purpose.

Refuse was collected from the 5,355 dwelling houses, as well as from schools, business and industrial premises, an estimated weight of 6,050 tons being collected. The total cost of

collection amounting to £18,810, this was equal to a cost of £3 2s. 6d. per ton and £3 5s. 0d. per house.

Once again, regrettably costs of collection and disposal have risen. With this in mind a new larger refuse collection vehicle has been ordered. This vehicle will be used to collect larger loads, consequently making fewer journeys to the tip and it is intended to reorganise the whole of the collection service around this vehicle and show some welcome savings in the cost of the service.

Waste paper was collected from shops and other business premises and sold to John Rostrons paper mill, the income from the sale of 61.5 tons amounting to £477.

### **Hairdressers or Barbers**

Routine inspections have been made of these premises and it has not been necessary to take any action under the provisions of the Act. Informal or verbal request has usually achieved the objective.

There are 23 premises registered with the Council under Section 120 of the West Riding County Council (General Powers Act, 1951).

### **Public Swimming Baths, Denaby Main**

This is an indoor swimming pool with heated, filtered and chlorinated water; the treatment is continuous. Four samples were submitted to the Public Health Service Laboratory and 2 to the Public Analyst all of which were satisfactory. During the winter months a floor is put in and the building then used for dancing and indoor sports such as five-a-side football.

### **Water Supplies**

The area is supplied with water by the Doncaster and District Joint Water Board.

The X.L. Crisp Co. Ltd. continued to use water from their private borehole.

Samples of water from both public and private supplies were submitted to the Public Analyst for chemical and bacteriological analysis. These tests showed the town supply to be satisfactory; the private supply apart from excessive hardness, was also satisfactory.

## Rodent Control

The Council's policy of providing a free Rodent Control Service was continued, domestic and business premises being treated without charge.

Infestation during the year and relevant inspections were as follows:—

Inspections	...	...	...	...	...	7,546
Infestations—Rats	...	...	...	...	..	226
Infestations—Mice	...	...	...	...	...	212
Estimated kill of rats	...	...	...	...	...	608
Estimated kill of mice	...	...	...	...	...	741

## SHOPS AND FACTORIES

### Offices, Shops and Railway Premises Act 1963

Initial inspections of the bulk of the premises covered by this extremely useful piece of legislation were completed during 1965. During 1966 it was necessary only to complete the few remaining inspections and register and inspect new premises arising during the year. In addition of course, further visits were made to premises previously visited.

There were no accidents reported in these premises during the year.

The number of premises on the register and the numbers inspected are shown in the following table.

Premises	No. on Register	Number of		
		Inspections	Notices Served	Premises Improved
Offices	13	—	—	—
Retail Shops	59	59	2	2
Warehouses	6	1	1	1
Catering Establishments	7	5	—	—
	85	66	3	3



Table (1)

## Factories

Inspections for purpose of provisions to health.

Premises (1)	No. on Register (2)	Number of		
		Inspec- tions (3)	Written Notices (4)	Occupiers Prosecuted (5)
(1) Factories in which Secs. 1 2, 3, 4 and 6 are enforced by local authorities	7	10	—	—
(2) Factories not included in (1) in which Section 7 is enforced by the local authority	26	30	—	—
(3) Other premises in which Section 7 is enforced by the local authority. (Excluding outworkers premises)	—	—	—	—
<b>TOTAL</b>	<b>33</b>	<b>40</b>	<b>—</b>	<b>—</b>

## Atmospheric Pollution

The Council continued to take part in the National Survey of Atmospheric Pollution organised by the Department of Scientific and Industrial Research. For this purpose two daily volumetric sampling machines are in use, one at The Priory and one at Denaby Clinic.

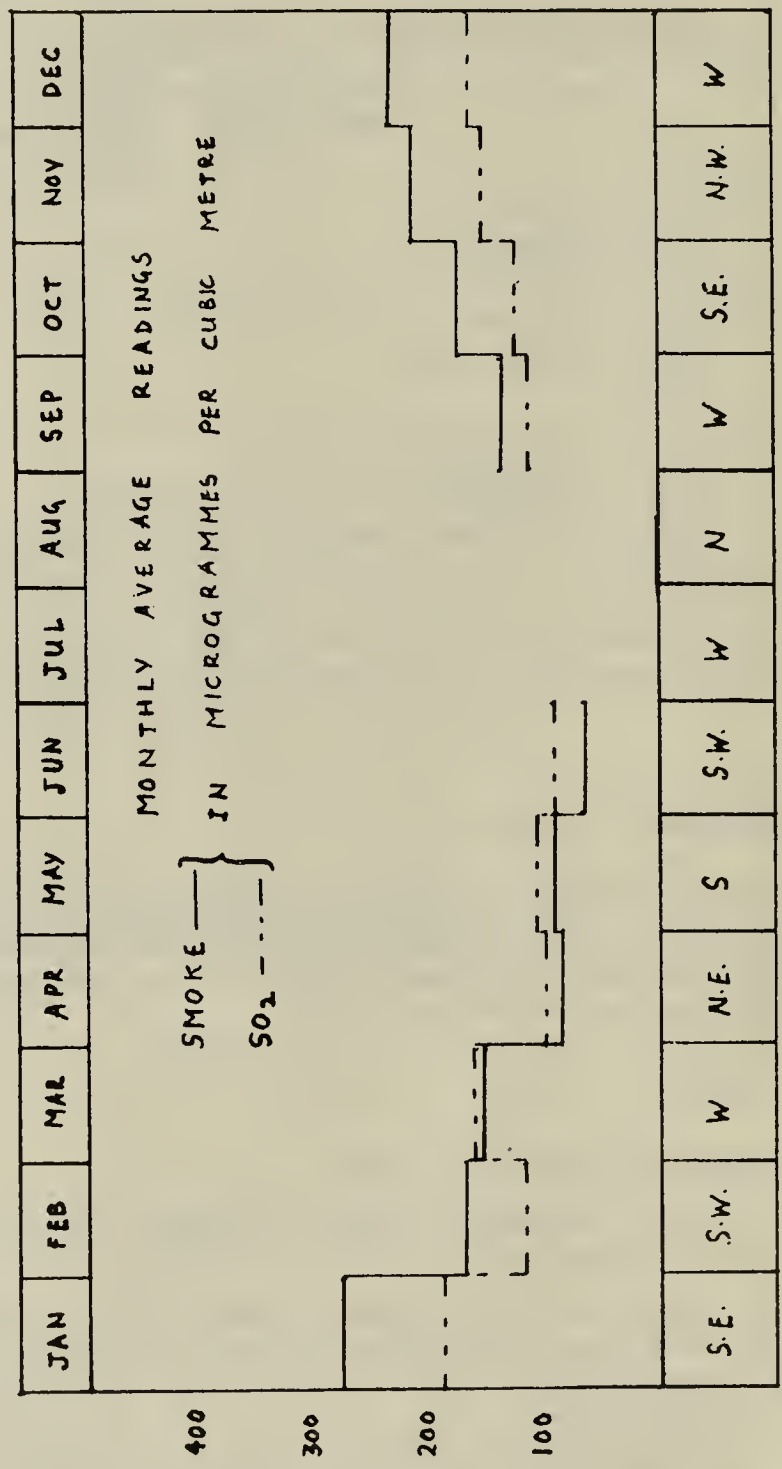
## Scrap Metal Dealers Act, 1964

This legislation requires all persons dealing in scrap metal to be registered by the Local Authority.

There are 9 such registered dealers in the Urban District. Not all of these have scrap yards, they mainly collect and sell to a large dealer, not themselves storing the scrap metal on their own premises.

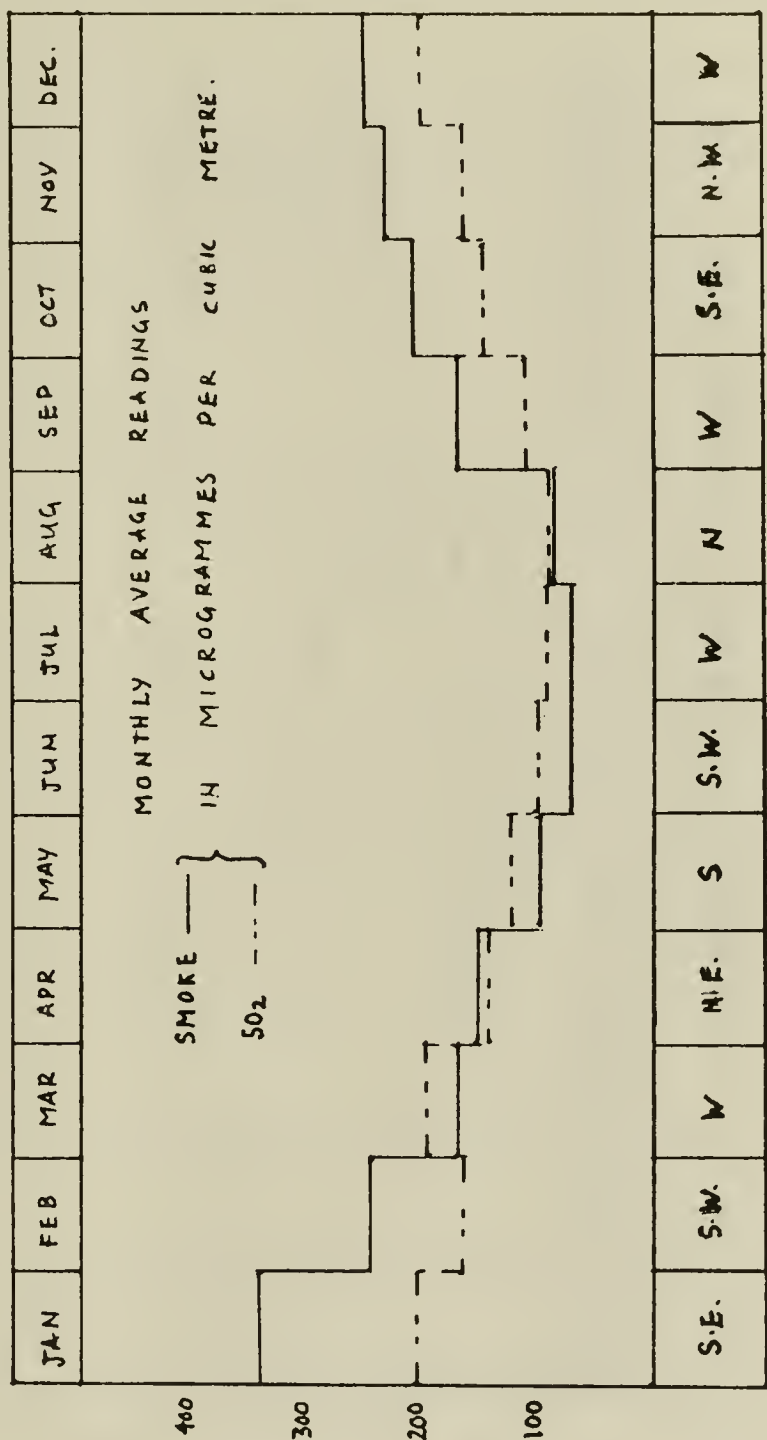
The police took action against 4 of these men, the offence being that prescribed records of dealings in scrap metal were not kept. Fines between £3 and £10 were imposed.

TABLE 1 A.P.  
 VOLUMETRIC APPARATUS THE PRIORY



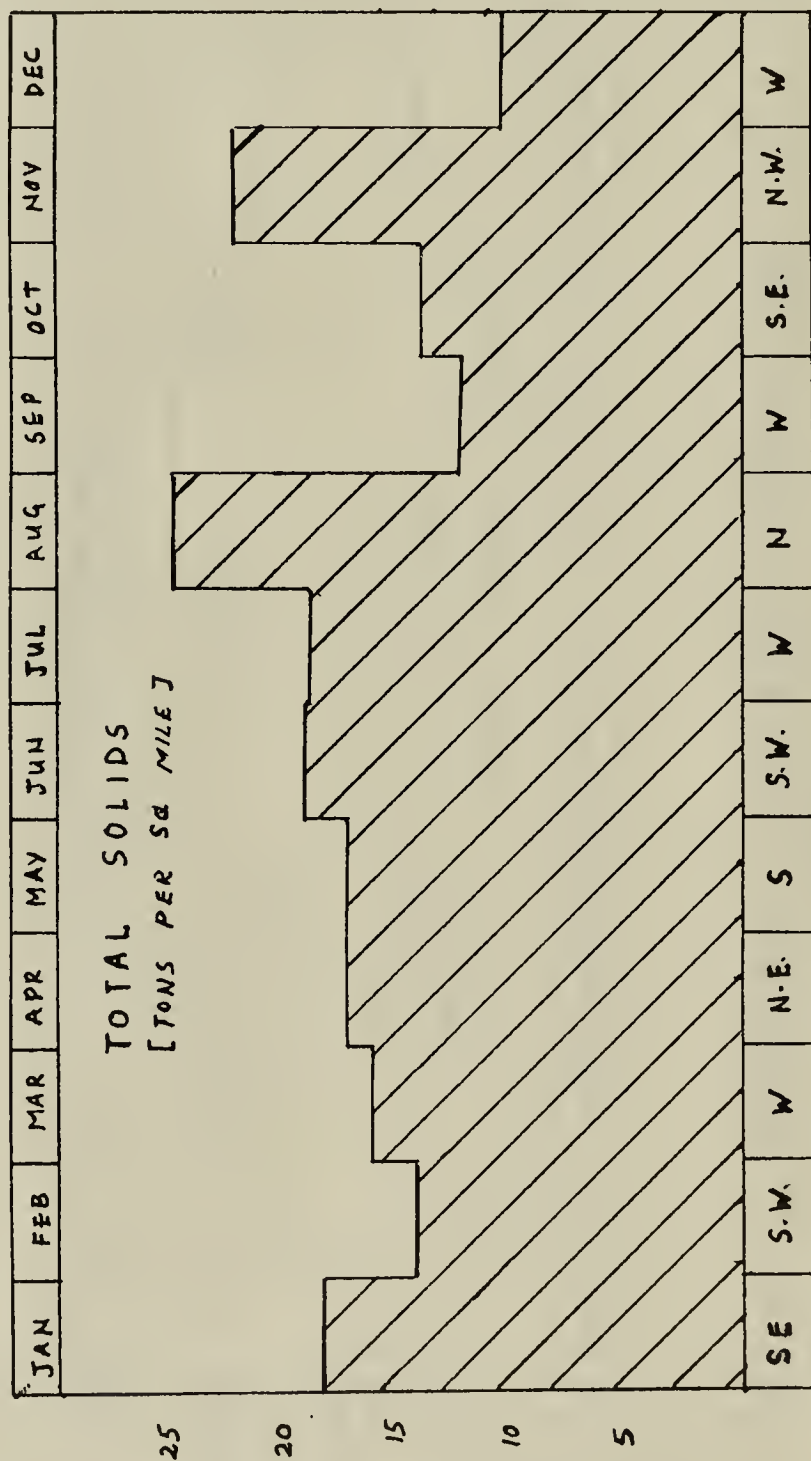
PREVAILING WINDS

TABLE 2 A.P.  
VOLUMETRIC APPARATUS DENABY CLINIC



PREVAILING WINDS

TABLE 3  
STANDARD DEPOSIT GAUGE



PREVAILING WINDS

# Wind Direction—1966 (stated in hours)

	Jan	Feb	Mar	Apl	May	June	July	Aug	Sept	Oct	Nov	Dec	Totals
N	81	45	17	82	32	41	114	91	23	60	64	20	670
NE	36	70	3	178	37	48	10	61	12	14	19	0	488
NNE	15	14	1	21	4	16	11	14	2	3	19	0	120
ENE	16	17	0	48	18	12	1	17	6	1	3	1	140
E	70	81	0	81	25	14	11	70	23	36	25	0	436
SE	144	87	13	40	90	51	23	43	37	101	23	54	706
SSE	21	23	9	11	24	23	14	9	16	32	7	32	221
ESE	30	13	1	1	7	8	4	6	2	25	7	0	104
S	44	75	86	46	100	71	40	69	69	88	55	111	854
SW	32	103	113	49	90	140	77	66	105	47	50	64	936
SSW	11	31	21	31	25	27	17	12	25	11	31	24	266
WSW	8	22	43	10	31	15	27	14	28	23	19	18	258
W	33	32	205	31	74	97	175	69	111	48	119	171	1165
NW	62	5	99	29	64	37	98	89	21	84	131	93	812
NNW	28	5	14	16	17	9	33	34	9	37	54	4	260
WNW	11	10	72	12	24	39	60	23	19	19	52	112	453
Prevailing Winds	SE	SW	W	NE	S	SW	W	N	calm	calm	NW	W	
Calm	102	39	47	33	82	72	53	47	195	115	42	40	867
Total wind hours per month	642	633	697	686	662	628	715	689	508	629	648	704	7841
Possible hours per month	744	672	744	720	744	720	744	744	720	744	720	744	8760
1965 Total wind hours per month	746	662	744	719	744	718	744	744	721	744	722	745	8753

## SECTION "D"

### HOUSING IN THE AREA

During the year tenders for house building were accepted and work commenced in building on Wellgate and Maplegrove. As a result inspection of a further area in Denaby Main was commenced. This was the Doncaster Road No. 3 Clearance Area and contained 62 houses and was represented to the Council in October. Inspection of the next area, Adwick Street Clearance Area, containing 48 houses was commenced before the year end.

It is hoped that the Council's building programme will proceed at a rate suitable to permit this tempo to be maintained.

#### Overcrowding

There were no cases of statutory overcrowding discovered during the year. Overcrowding of a sort does exist, as evidenced by the number of sub-tenants applying for council houses. Investigation of these cases usually reveals that while living conditions are cramped and uncomfortable for all concerned, overcrowding as defined in the Housing Acts does not exist.

*See tables A. and B. on pages 23 and 24*

No. of families rehoused during the year into Council Owned dwellings—

(a) Clearance areas, etc.	...	...	...	Nil
(b) Overcrowding	...	...	...	Nil
(c) General Needs	...	...	...	32

#### New Dwellings—

No. of new dwellings completed during the year:—

By the Local Authority	...	...	...	—
By Private Enterprise	...	...	...	41



A.	Section 42 of the Housing Act 1957 In Clearance Areas declared under	Number of Houses Demolished:	
		(a) Unfit for human habitation ..... (b) Included by reason of bad arrangement ..... (c) On land acquired under Section 43(2) H.A.1957 .....	— — —
	NOT IN CLEARANCE AREAS	Persons Displaced during the Year:	
		(a) From houses unfit for human habitation ..... (b) From houses included by reason of bad arrangement ..... (c) From houses on land acquired under Section 43(a) Housing Act 1957 .....	— — —
		Families Displaced during the year:	
		(a) From houses unfit for human habitation ..... (b) From houses included by reason of bad arrangement ..... (c) From houses on land acquired under Section 43(2) Housing Act 1957 .....	— — —
		Number of Houses Demolished:	
		(a) As a result of formal or informal procedure under Section 16 or Section 17(1) Housing Act 1957..... (b) Local Authority owned houses certified unfit by the Medical Officer of Health ..... (c) Houses unfit for human habitation where action has been taken under local Acts..... (d) Houses included in unfitness orders made under para. 2 of the Second Schedule to the Town and Country Planning Act 1959 .....	1 — — —
		Persons Displaced during the Year:	
		(a) From houses to be demolished as a result of formal or informal procedure under Section 16 or Section 17(1) Housing Act 1957 ..... (b) From local authority owned houses certified unfit by the Medical Officer of Health ..... (c) From houses unfit for human habitation where action has been taken under local Acts ..... (d) From houses included in unfitness orders .....	— — — —
	Number of dwellings included above which were previously reported as closed		—

B.	UNFIT HOUSES CLOSED during the year in pursuance of Closing Orders or Undertakings			Number of Houses:	
				(a) Under Sections 16 (4), 17(1) and 35 (1) Housing Act 1957 and Section 26 Housing Act 1961 .....	—
				(b) Under Sections 17 (3) and 26 Housing Act 1957 .....	—
				Persons Displaced during the Year:	
				(a) Under Sections 16(4), 17(1) and 35 (1) Housing Act 1957 and Section 26 Housing Act 1961.....	—
				(b) Under Sections 17 (3) and 26 Housing Act 1957 .....	—
C.	Unfit Houses made fit and houses in which defects were remedied			Families Displaced during the Year:	
				(a) From Houses to be closed:	
				Under Sections 16(4), 17(1), and 35(1) Housing Act 1957 and Section 26, Housing Act 1961.....	—
				Under Sections 17(3) and 26 Housing Act 1957.....	—
				PARTS OF BUILDINGS CLOSED under Section 18, Housing Act 1957:	
				Number of Houses .....	—
D.	UNFIT HOUSES IN TEMPORARY USE (Housing Act 1957)	POSITION AT END OF YEAR	Retained for Temporary Accommodation	Number of Persons Displaced .....	—
				Number of Families Displaced .....	—
				After informal action by local authority: By owner	42
				After formal notice under Public Health Acts (a) By owner	6
				(b) By local Auth.	—
				After formal notice under Sec. 9 and 16 Housing Act 1957 (a) By Owner .....	—
E.	Purchase of Houses by Agreement	POSITION AT END OF YEAR	Retained for Temporary Accommodation	(b) By local Auth.	—
				Under Section 24, Housing Act 1957 By Owner .....	—
				Under Sec. 48	
				Number of houses .....	—
				Number of separate dwellings contained therein .....	—
				Under Sec. 17(2)	
F.	Purchase of Houses by Agreement	POSITION AT END OF YEAR	Retained for Temporary Accommodation	Number of houses .....	—
				Number of separate dwellings contained therein .....	—
				Under Sec. 46	
				Number of houses .....	—
				Number of separate dwellings contained therein .....	—
				Licensed for temporary accommodation under Section 34 or 53	
G.	Purchase of Houses by Agreement	POSITION AT END OF YEAR	Retained for Temporary Accommodation	Number of houses .....	—
				Houses in clearance areas other than those included in confirmed orders or compulsory purchase orders:	
				Number of houses .....	26
H.	Purchase of Houses by Agreement	POSITION AT END OF YEAR	Retained for Temporary Accommodation	Number of occupants .....	78

## Grants for Conversion or improvement of Housing Accommodation

	Formal applications received during the year	Applications approved during the year	Number of improvements completed during the year
	Number of dwellings	Number of dwellings	
(a) Conversions (The number of dwellings is the number resulting from completion of the work)	Nil	Nil	Nil
(b) Improvements	25	25	20

Details of advances for the purpose of acquiring or constructing houses—

3 advances were made for the purpose of acquiring houses.

## SECTION "E"

### INSPECTION AND SUPERVISION OF FOOD

#### Food Hygiene Regulations, 1960

900 inspections were made of various premises where food is handled either in its raw state or as a finished product available to the public. In the majority of inspections no transgression of the provisions of the Food and Drugs Act or the Food Hygiene Regulations was found; informal action was necessary to rectify some matter with regard to the latter regulations.

Two cases of foreign bodies in foodstuffs were reported to me during the year. One concerned a snail in a tin of imported tomatoes. Due to the legal difficulties envisaged in this case it was decided that a prosecution would not be taken.

The other case concerned a chip of wood embedded in a loaf of bread. This was dealt with under the Food and Drugs Act, 1957, as being food not of the nature or substance or quality demanded. The case was brought before the West Riding County Magistrates Court in October, 1966. The firm pleaded guilty to the offence, a fine of £5 was imposed.

Inspections made regarding food, and food premises were as follows:—

Inspection of Slaughtering and Slaughterhouses	49
Meat Inspections ... ..	49
Butchers' Shops ... ..	110
Canteens ... ..	14
Dairies and Milk Distributors ... ..	8
Fishmongers ... ..	50
Food Preparing Premises ... ..	90
Grocers ... ..	80
Greengrocers ... ..	25
Ice Cream Premises ... ..	30
Market Stalls ... ..	300
Street Vendors' and Hawkers' Carts ... ..	30
Miscellaneous Food Visits ... ..	50
Suspected food poisoning investigation enquiries	15

### Food Inspection

The following food was surrendered for disposal during the year:—

176 lb. Meat  
214 lb. fish  
58 lb. tinned meat

### Milk

Conisbrough is a specified area under the provisions of the Food and Drugs Act and no milk sold here unless it is 'Designated' Milk, i.e. Pasteurised, Sterilised or Tuberculin tested.

### Registration of Food Premises

Retailers of: Ice Cream ... ..	45
Retailers of: Sausaged and Prepared Food ...	8

Registration of Food Hawkers and their Premises under Section 76 of the West Riding County Council (General Powers) Act, 1951—

There are 28 registered as food hawkers within the district and 17 who have premises outside the district.

### Public Markets

The inspection of the privately owned market at Denaby Main has resulted in a very high standard being obtained from premises used for sale of food and during the last twelve months no trouble was experienced from this source.

## Meat Inspection

The slaughterhouse, modernised in 1963, owned and occupied by Mr. G. Goodwin, a local butcher, continued to be used during the year. Mr. Goodwin is to be congratulated on the high standard of hygiene he adopts.

Details of the animals slaughtered and inspected during the year are contained in the following table—

	Cattle ex- clud- ing Cows	Cows	Calves	Sheep and Lambs	Pigs	Horses
Number killed .....	190	—	—	571	17	—
Number inspected .....	190	—	—	—	17	—
All diseases except Tuberculosis and Cysticerci						
Whole carcasses condemned	—	—	—	—	—	—
Carcases of which some part or organ was condemned .....	50	—	—	21	1	—
Percentage of the number inspected, affected with dis- ease other than Tuberculosis etc. ....	26.3%	—	—	5.7%	6%	—
Tuberculosis only:—						
Whole carcase condemned	—	—	—	—	—	—
Organs or part carcasses						
Percentage of Number inspected, affected with tuber- culosis .....	—	—	—	—	—	—
Cysticercosis:—						
Carcase of which some part or organ was condemned	—	—	—	—	—	—
Carcase submitted to treatment by refrigeration ...	—	—	—	—	—	—
Generalised and totally condemned .....	—	—	—	—	—	—
Percentage of whole .....	—	—	—	—	—	—

**SECTION "F"**

**PREVENTION AND CONTROL OVER INFECTIOUS AND OTHER DISEASES**

**Infectious Diseases (Corrected)**

**Age Distribution**

Diseases	Total Cases Notified	Cases after Correction	Under 1 yr.	1 —	2 —	3 —	4 —	5 — 9	10 — 14	15 — 24	25 — 44	45 — 64	65 and Over
Scarlet Fever .....	1	1	—	—	—	1	—	—	—	—	—	—	—
Whooping Cough	4	4	1	—	1	—	—	2	—	—	—	—	—
Measles .....	30	30	3	6	2	1	4	13	1	—	—	—	—
Dysentery .....	2	2	—	1	—	—	—	1	—	—	—	—	—
<b>TOTALS</b>	<b>37</b>	<b>37</b>	<b>4</b>	<b>7</b>	<b>3</b>	<b>2</b>	<b>4</b>	<b>16</b>	<b>1</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>



## TUBERCULOSIS

### No. on Register at 31st December, 1966

			Males	Females	Total
Pulmonary	...	...	79	39	118
Non-Pulmonary	...	...	9	10	19
			88	49	137

### No. Removed from Register during 1966

			Pulmonary		Non-Pulmonary		Total
			M.	F.	M.	F.	
Deaths	...	...	2	—	—	—	2
Others (cured, re-diagnosed transfers of area etc.)			2	—	—	—	2
			4	—	—	—	4

### Additions to Register during 1966

			Pulmonary		Non-Pulmonary		Total
			M.	F.	M.	F.	
New Notifications	...		4	1	—	2	7
Others (cases restored to Register, transfers, etc.)			1	—	—	—	1
			5	1	—	2	8

### New Notifications

Age Groups			Pulmonary		Non-Pulmonary		Total
			M.	F.	M.	F.	
15-24	...	...	1	—	—	—	1
25-34	...	...	—	1	—	2	3
45-54	...	...	1	—	—	—	1
55-64	...	...	1	—	—	—	1
65-74	...	...	1	—	—	—	1
			4	1	—	2	7





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